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COMMONWEALTH OF KENTUCKY  
TREY GRAYSON, SECRETARY OF STATE  
ANNUAL REPORT  
DUE JUNE 30, 2007



0538138

ORGANIZATION ID # <b>0538138</b>	STATE OR COUNTRY OF INCORPORATION <b>KY</b>	ORGANIZATION DATE <b>06/03/2003</b>	FILING FEE <b>\$15.00</b>
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**RECEIVED**  
**FEB 14 2007**  
SECRETARY OF STATE  
COMMONWEALTH OF KY

(1) EXACT CORPORATE NAME AND CURRENT PRINCIPAL OFFICE ADDRESS

DIXIE CARRIERS, INC.  
6201 DIXIE ROAD  
DIXIE, GA 31629-9725

(3) THE PRINCIPAL OFFICE ADDRESS IS HEREBY CHANGED TO

(2) CURRENT REGISTERED AGENT AND REGISTERED OFFICE ADDRESS  
Changes made to the registered agent or registered office cannot be made on this form. Complete (4) to request a form to be mailed or download form from web site.

DORIS JUNE BURTON  
1499 PEA RIDGE ROAD  
AUGUSTA, KY 41002

(4) MAIL A STATEMENT OF CHANGE OF AGENT OR OFFICE TO

(5) PRINCIPAL OFFICERS If (5) is blank, type or print the names and business addresses of the current principal officers. If sole officer, please note. The annual report will be returned if business addresses are not listed. If the corporation has previously filed an annual report, verify the names and titles of officers listed below. Please note any additions to or changes in the principal officers and give the business address for each person listed.

President	Larry Holleran	Address
Vice President	Mary Holleran	Address
Secretary	Mary Holleran	Address
Treasurer	Larry Holleran	Address
		Address
		Address

(6) DIRECTORS Type or print the names and business addresses of the corporation's directors. No listing of directors is verification that the corporation has dispensed with directors (KRS 271B.8-010(3)). Nonprofit corporations must list three (3) or more directors (KRS 273.211). The annual report will be returned if business addresses are not listed.

Name	Address
Name	Address
Name	Address
Name	Address

(7) Check here if you are a cooperative corporation or association organized under KRS 272. ☐  
Check here if you are a rural electric or rural telephone cooperative corporation organized under KRS 279. ☐

I VERIFY THAT THE INFORMATION IN THIS ANNUAL REPORT IS CURRENT AS OF THE DATE THIS REPORT IS EXECUTED.

			1-31-07
Signature of Officer or Chairman of the Board	Type or Print Name	Title	Date

ANNUAL REPORT AND FILING FEE

Submit for filing the completed annual report form and correct filing fee as indicated above. Make check payable to the "Kentucky State Treasurer". Please do not send cash.

MAILING ADDRESS	OFFICE LOCATION
Trey Grayson	Secretary of State
Secretary of State	State Capitol, Room 154
P O Box 1150	700 Capital Avenue
Frankfort, KY 40602-1150	Frankfort, KY 40601
	(502)-564-2848

NOTE: P O Box 1150 is for annual report filings only.